B 6D (Official Form 6D) (12/07)

In	re	ROGER	PIERRE	BAYLOCQ						
Debtor										

Case No. <u>10-51372-GWZ</u>

(If known)

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

HUSBAND, WIFE, JOINT, OR COMMUNITY CREDITOR'S NAME AND DATE CLAIM WAS AMOUNT OF CLAIM JNLIQUIDATED UNSECURED CONTINGENT CODEBTOR MAILING ADDRESS INCURRED, WITHOUT PORTION, IF DISPUTED INCLUDING ZIP CODE AND NATURE OF LIEN, DEDUCTING VALUE ANY AN ACCOUNT NUMBER AND OF COLLATERAL (See Instructions Above.) DESCRIPTION AND VALUE OF **PROPERTY** SUBJECT TO LIEN ACCOUNT NO. 10700001581300 Date: \$420,000.00 Aspen Valley Christian Foundation 835-875 Humboldt\* c/o Evergreen Note Servicing 295 Holcomb Ave., Ste 3 NOT IN HIS NAME SINCE 2009 Reno, NV 89502 VALUE \$ ACCOUNT NO. 118527374 \$180,932.00 Bank of America Date: P.O. Box 515504 Los Angeles, CA 90051 1490 W 7th St Duplex VALUE \$ ACCOUNT NO. 107002006582 Date: \$197,529.00 Corolla, Ronald 840 Cleveland St c/o: Allied Inc. 845 Mc Lean St. 6121 Lakeside Dr., Ste 150 Reno, NV 89511 VALUE \$ continuation sheets Subtotal > \$ 798,461.00 \$ (Total of this page) attached Total ▶ \$ (Use only on last page) (Report also on Summary of (If applicable, report

Schedules.)

also on Statistical Summary of Certain Liabilities and Related

Data.)

B 6D (Offici 20 Form 6D) (12/07) – Cont.	
In re,	Case No.
Debtor	(if known)

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

	T	T	T	т	1	·	7	
CREDITO R'S NAME AND MAILIN G ADDRESS INCLUDI NG ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.CV0902012					<u> </u>			
Director of the Firm Foundation 19919 NE 1 O7th Ave Battle Ground, WA 98604			Date: 10/29/09  Judgement Lien				\$71,145.77	
			VALUE \$	-				
ACCOUNT NO.				+		······································		
Harvest Time Foundation c/o: Evergreen Note Servicing			Date:				\$425,000.00	
295 Holcomb Ln., Ste 3 Reno, NV 89 502			873-882 Mc Lean St.				Ψ423,000.00	
ACCOLD/F NO			VALUE\$					
ACCOUNT NO. 1010-22-0001	1566		Date:					
Pabst, Dorothy c/o: Evergreen Note Servicing 295 Holcomb Ln., Ste 3 Reno, NV 895 02			1275 Stardust Gateway Inn	X			\$1,007,000.00	
		F	VALUE \$					
ACCOUNT NO.1071010004553	3							
Pura, Fred & Florence c/o: Allied Inc. 6121 Lakeside Dr., Ste 150 Reno, NV 89511			Date: 1490 W 7th Duplex				\$26,000.00	
			VALUE \$					
ACCOUNT NO.								
Shart 2 00			VALUE \$					
Sheet no. 2 of 2 continuate sheets attached to Schedule of Creditors Holding Secured Claims	io <b>n</b>	Subtotal (s)► (Total(s) of this page)				\$ 1,529,145.77	\$	
		Total(s) ► (Use only on last page)				-	\$	\$
						٠	Report also on	(If applicable.

(Report also on Summary of Schedules.) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.) 2